AHCCCS MEDICAL POLICY MANUAL

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

964 PARENT/FAMILY SUPPORT PROVIDER TRAINING, CREDENTIALING AND SUPERVISION REQUIREMENTS

EFFECTIVE DATES: 07/01/16, 10/01/18

REVISION DATE: 06/13/18

I. PURPOSE

This Policy applies to, AHCCCS Complete Care (ACC), ALTCS E/PD, and RBHA Contractors; Fee-For-Services (FFS) Programs as delineated within this Policy including: Tribal ALTCS, TRBHA, the American Indian Health Program (AIHP); and all FFS populations, excluding Federal Emergency Services (FES). (For FES, see AMPM Chapter 1100). This Policy establishes requirements for training and credentialing standards for Credentialed Parent/Family Support individuals providing Parent/Family Support Services. Services outlined in this Policy for FFS programs and populations are monitored by AHCCCS/DHCAA.

II. DEFINITION

CREDENTIALED	An indi	ividua	l who	meets th	ne liv	ved experien	ce outli	ned in this
PARENT/FAMILY SUPPORT	Policy	and	has	passed	an	AHCCCS	OIFA	approved
PROVIDER (CPFSP)	credentialed training exam.							

CREDENTIALED	AHCCCS OIFA
PARENT/FAMILY SUPPORT	with competencie
PROVIDER (CPFSP)	
TRAINING PROGRAM	

AHCCCS OIFA-Approved credentialing program compliant with competencies and requirements as outlined in this Policy.

CREDENTIALED TRAINER An individual who meets the lived experience outlined in this Policy and provides training to individuals seeking employment as a credentialed peer/family support provider.

FAMILY MEMBER A parent or primary caregiver with lived experience who has raised or is currently raising a child with emotional, behavioral health or substance use needs.

FAMILY MEMBER (ADULT SYSTEM)

An individual who has lived experience as a primary natural support for an adult with emotional, behavioral health or substance abuse needs.

AHCCCS MEDICAL POLICY MANUAL

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

PARENT/FAMILY SUPPORT SERVICES

Family support services are directed toward restoration, enhancement, or maintenance of the family functioning to increase the family's ability to effectively interact and care for the person in the home and community.

III. POLICY

A. OVERVIEW

The Arizona Health Care Cost Containment System/Office of Individual and Family Affairs (AHCCCS/OIFA) has established training requirements and credentialing standards for Parent/Family Support individuals providing Parent/Family Support Services, as described in the AHCCCS Covered Behavioral Health Services Guide. AHCCCS/OIFA recognizes the importance of the Parent/Family Support role as a viable component in the delivery of integrated services and expects statewide support for these roles. AHCCCS/OIFA expects consistency and quality in Parent/Family delivered support of integrated services in the AHCCCS Children and Adult Systems of Care.

B. CREDENTIALED PARENT/FAMILY SUPPORT PROVIDER AND TRAINER QUALIFICATIONS

- 1. Individuals seeking employment as a Credentialed Parent/Family Support Provider (CPFSP) or Trainer in the children's system or adult system shall:
 - a. Meet the definition of a family member, and
 - b. Qualify as a Behavioral Health Professional (BHP), Behavioral Health Technician (BHT), or Behavioral Health Paraprofessional (BHPP).

C. CREDENTIALED PARENT/FAMILY SUPPORT PROVIDER (CPFSP) TRAINING PROGRAM APPROVAL PROCESS

- A CPFSP Training Program shall submit its program curriculum, competency exam, and exam-scoring methodology (including an explanation of accommodations or alternative formats of program materials available to individuals who have special needs) to AHCCCS/OIFA. AHCCCS/OIFA will issue feedback or approval of the curriculum, competency exam, and exam-scoring methodology in accordance with this Policy.
- 2. If a program makes substantial changes (e.g. meaning change to content, classroom time) to its curriculum or if there is an addition to required elements, the program shall submit the updated content to AHCCCS/OIFA for review and approval before the changed or updated curriculum is to be utilized.
- 3. AHCCCS/OIFA will base approval of the curriculum, competency exam, and examscoring methodology only on the elements required in this Policy. If a CPFSP Training Program requires regional or culturally specific training exclusive to a GSA

AHCCCS MEDICAL POLICY MANUAL



CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

or specific population, the specific training cannot prevent employment or transfer of Parent/Family Support credentials based on the additional elements or standards.

D. COMPETENCY EXAM

1. Individuals seeking employment as a CPFSP shall complete and pass a competency exam with a minimum score of 80% upon completion of required training. Each CPFSP Training Program has the authority to develop a unique competency exam. However, all exams shall include questions related to each of the curriculum core elements listed in this Policy. Agencies employing CPFSP who are providing Parent/Family Support Services are required to ensure that its employees are competently trained to work with the populations served.

E. CREDENTIALED PARENT/FAMILY SUPPORT PROVIDER EMPLOYMENT TRAINING CURRICULUM STANDARDS

- 1. A CPFSP Training Program curriculum shall include the following core elements for persons working in both Children's System of Care (CSOC) and Adults' System of Care (ASOC):
 - a. Communication Techniques:
 - i. Person first, strengths-based language, using respectful communication, demonstrating care and commitment,
 - ii. Active listening skills: The ability to demonstrate empathy, provide empathetic responses and differentiate between sympathy and empathy, listening non-iudgmentally, and
 - iii. Using self-disclosure effectively, sharing one's story when appropriate.
 - b. System Knowledge:
 - i. Overview and history of the Arizona Behavioral Health (BH) System,
 - ii. Jason K., Arizona Vision and 12 Principles and the Child and Family Team (CFT) process, Guiding Principles for Recovery-Oriented Adult Behavioral Health Services and Systems, Adult Recovery Team (ART), and Arnold v. Sarn, Introduction to the Americans with Disabilities Act (ADA), funding sources for behavioral health systems,
 - ii. Overview and history of the family and peer movements, the role of advocacy in systems transformation,
 - iii. Rights of the caregiver/member, and
 - iv. Transition Aged Youth: Role changes when bridging the ASOC and CSOC at transition for a member, family and team.
 - c. Building Collaborative Partnerships and Relationships:
 - i. Engagement, Identifies and utilizes strengths,
 - ii. Utilize and model conflict resolution skills, and problem solving skills,
 - iii. Understanding individual and family culture, biases, stigma, and system's cultures, and
 - iv. The ability to identify, build and connect individuals and families, including families of choice, to community and natural/informal supports.

AHCCCS MEDICAL POLICY MANUAL

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

d. Empowerment:

- i. Empower family members and other supports to identify their needs, and promote self-reliance,
- ii. Identify and understand stages of change, and
- iii. Be able to identify unmet needs.

e. Wellness:

- i. Understanding the stages of grief and loss,
- ii. Understanding self-care and stress management,
- iii. Understanding compassion fatigue, burnout, and trauma informed approaches
- iv. Resiliency and recovery, and
- v. Healthy personal and professional boundaries.
- f. Credentialed Parent/Family Support Provider training programs shall not duplicate training required of individuals for employment with a licensed agency or Community Service Agency (CSA). Training elements in this Policy are specific to the Credentialed Parent/Family Support role in the AHCCCS Programs and instructional for Parent/Family Support interactions.
- 2. Contractors shall develop and make available policies and procedures as well as additional resources for development of curriculum, including Contractor staff contacts for questions or assistance.

F. SUPERVISION OF CREDENTIALED PARENT/FAMILY SUPPORT PROVIDERS

Contractors shall establish amount and duration of supervision of CPFSP and follow the requirements outlined below:

- 1. Agencies employing CPFSP shall provide supervision by individuals qualified as BHT or BHP. Supervision shall be appropriate to the services being delivered and the qualifications of the CPFSP as a BHT, BHP, or BHPP. Supervision shall be documented and inclusive of both clinical and administrative supervision.
- 2. Individuals providing supervision shall receive training and guidance to ensure current knowledge of best practices in providing supervision to CPFSP.
- 3. Contractors shall develop and make available to the providers, policies, and procedures regarding resources available to agencies for establishing supervision requirements and any expectations for agencies regarding Contractor's monitoring/oversight activities for this requirement.

G. PROCESS OF CREDENTIALING

1. Contractors shall ensure provider agencies maintain documentation of required qualifications and credentialing for CPFSP.

AHCCCS MEDICAL POLICY MANUAL

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM

- 2. Contractors shall develop and make available to providers policies and procedures that describe monitoring and auditing/oversight activities where personnel files of CPFSP are reviewed.
- 3. Contractors shall develop and make available to providers policies and procedures describing the process for submitting evidence of CPFSP credentialing to AHCCCS/OIFA.